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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/933,164	08/21/2001	Wataru Ito	500.40539X00	6449

24956 7590 12/27/2005

MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.
1800 DIAGONAL ROAD
SUITE 370
ALEXANDRIA, VA 22314

EXAMINER

CHOOBIN, BARRY

ART UNIT	PAPER NUMBER
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2623

DATE MAILED: 12/27/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No.	Applicant(s)	
	09/933,164	ITO ET AL.	
	Examiner	Art Unit	
	Barry Choobin	2623	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Barry Choobin. (3) ____.
- (2) Carl I. Brundidge. (4) ____.

Date of Interview: 19 December 2005.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.
If Yes, brief description: ____.

Claim(s) discussed: 36.

Identification of prior art discussed: ____.

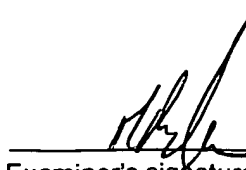
Agreement with respect to the claims f) ☒ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: in view of cancelling claim 36, the terminal disclaimer filed on 11/28/2005 was improperly entered. Upon reciving an officail request from the applicant the entery of the terminal disclaimer will be reversed.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.


12/24/05
Examiner's signature, if required



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Fax Cover Sheet

Date: 21 Dec 2005

To: Carl I Brundidge	From: Barry Choobin
Application/Control Number: 09/933,164	Art Unit: 2623
Fax No.: 703-684-1157	Phone No.: 571-272-7447
Voice No.: 703-684-1120	Return Fax No.: (571) 273-8300
Re:	CC:
<input checked="" type="checkbox"/> Urgent <input type="checkbox"/> For Review <input type="checkbox"/> For Comment <input type="checkbox"/> For Reply <input type="checkbox"/> Per Your Request	

Comments:

Number of pages 2 including this page

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